## REQUEST FOR ASSESSOR'S PROPERTY INFORMATION

Organization/Company Name:											
Address, City, State, Zip:											
Contact Person:							Phone No.:				
Dat	e of l	Requ	est:		Fax No.:						
					Circle				1		
					CDROM or			OM or			
	0	<u> </u>			ALL		FTP				
	Q T		DESCRIPTION			l l	CD ROM	FTP			
	Y	Y			COUNT			***	COST		
2		Real Property Full Legal Description Plat Index			ATZ 250 ATZ 006				\$200.00 \$162.00		
3			Tax Data Extract			ATZ 229			\$200.00		
FO.	R F1	TP TI	RANSFER	USER ID:	PASSWORD:						
IP ADDRESS:											
***For FTP files you must provide a USERID PASSWORD and IP ADDRESS. Please indicate which files											
by an X you wish to have sent via FTP.											
	PAPER (HARD COPY)										
	O	ГΥ		DE	SCRIPT	TION COST					
1									\$43.00		
2										\$250.00	
RETURN FORM TO:  DEPARTMENT OF ASSESSMENTS ATTN: Stanley W. Roe											
500 FOURTH AVENUE, ROOM 740											
SEATTLE, WA 98104-2384  FAX (206) 296-0595 EMAIL: stan.roe@kingcounty.gov/WEBSITE: http://www.kingcounty.gov/assessor/											
PLEASE SEND PAYMENT WITH FORM: Please make checks or money orders out to King County Treasurer and mail it to the above address.											
County Treasurer and man it to the above address.											
FOR DEPARTMENT OF ASSESSMENTS USE ONLY											
From: Department of Assessments											
To: King County Information Technology, Operations and Business Solution Division, Technical Services,											
Data Center Management, Production Control, 401, 5 <sup>th</sup> Avenue, CNK-IT-0600, Seattle, WA 98104											
Ke:	Re: Assessor's Information File Extracts										

DATE: \_\_\_\_\_